PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

J	ly -	Effect	ctive January 1, 2003					99B047A					
CLAIMS AS			(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN		
TOTAL CLAIMS			44				. 1	RATE	FEE	İ	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			644 minus 20=		. 24			X\$ 9=		OR	X\$18=	432	
INDEPENDENT CLAIMS			/ minus 3 = *		*	6		X42=		OR	X84=	504	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							· [TOTAL		OR		1686	
5.10.05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALLI	ENTITY	OR	OTHER SMALL	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 35	Minus	** 4	4.	= (1)		X\$ 9=		OR	X\$18=		
AME	Independent	• 5	Minus	***	9	<u> - 4</u>		X42=	,	OR	X84=		
	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENI	CLAIM		J	+140=		OR	+280=		
								TOTAL ADDIT. FEE			TOTAL ADDIT. FEE		
		(Column:1)	<u> </u>	Colur	mn 2)	(Column 3)	•			• ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	• .	=	╽╽	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	###			4	X42=		OR	X84=		
	rino i Prese	NTATION OF MI	ULTIPLE DE	CONUEN	CLAIM		֡֡֓֞֡֡֓֓֓֡֡֡֡֓֓֓֡֓֓֓֡֡֡֡֡֓֓֓֡֓֡֡֡֡֡֡֡֡֓֡֓֡֡֡֡	+140=		OR	+280=		
	٠.	•	•				1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
_		(Column 1) CLAIMS		(Colui	mn 2) IEST	(Column 3)	h .						
AMENDMENT C		REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	┧╏	X42=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┚╽	÷140=			+280=		
* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.										OR	TOTAL		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												